# State of South Dakota

RECEIVED

## Candidate's or Committee's Report of Receipts and Expenditures 2203

S.D. SEC. OF STATE

SECRETARY OF STATE

Candidates and candidate committees: File in the office where you filed your nominating petition.

PACS, political party, ballot question and other committees: File with Elections Department, Secretary of State's Office,
500 E Capitol Ave, Pierre, SD 57501-5070

| See pages 9 & 10 of the Guideline Book for specific instructions on completing this report.  Name of Candidate or Committee Frank Laurenz  Complete Mailing Address PO Box 359 Eagle Butte, 50 57605  Name of Person Making Report Frank Laurenz Phone 605-964-391  If you are a candidate, what office are you seeking 50 House 28 A  If you are a ballot question committee, indicate which measure(s) the committee was involved with during the reporting period and whether the measure was supported or opposed.  Type of Report (See pages 4 & 5 of Guideline Book)  For Reporting Period Ending (See pages 4 & 5 of Guideline Book)  The following verification must be completed before submitting report.  VERIFICATION OF PERSON MAKING REPORT  I Frank Laurenz (print name legibly), certify that I have examined this report and to the best of my knowledge and |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Name of Candidate or Committee Frank Laurenz  Complete Mailing Address PO Box 359 Easle Butte, SD 57625  Name of Person Making Report Frank Laurenz Daytime 605-964-391  If you are a candidate, what office are you seeking SD House 28 A  If you are a ballot question committee, indicate which measure(s) the committee was involved with during the reporting period and whether the measure was supported or opposed.  Type of Report (See pages 4 & 5 of Guideline Book)  For Reporting Period Ending (See pages 4 & 5 of Guideline Book)  The following verification must be completed before submitting report.  VERIFICATION OF PERSON MAKING REPORT  I Frank Laurenz (print name legibly), certify                                                                                                                                                                 |
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| I Frank Laurenz (print name legibly), certify                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
| that I have examined this report and to the best of my knowledge and                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
| belief it is true, correct and complete.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |
| Date: 12-27-02 Cardidate Signature or Signature of Committee Treasurer of Chairperson                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
| Revised July 2001                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
| Friedrins 772 day of                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| Dona Hazelti:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |

| Mame       | of Candidate or Committee Frank                                                                                   | Laurenz                               |                 |
|------------|-------------------------------------------------------------------------------------------------------------------|---------------------------------------|-----------------|
|            | the reporting period ending Dec                                                                                   |                                       |                 |
|            | Summary P                                                                                                         | 'age                                  |                 |
| This Pleas | summary sheet will give a brief outline of all campaign e transfer all totals from the schedules previously compl | finance activity during this releted. | porting period. |
| 1.         | Amount on hand, if any, at beginning of                                                                           | of reporting period                   | \$ <u>O</u>     |
| 2.         | Receipts                                                                                                          | •                                     |                 |
|            | Schedule A - Direct Contributions \$                                                                              | 4,201.00                              |                 |
|            | Schedule B - Fund-Raising Events \$                                                                               | 0                                     |                 |
|            | Schedule C - In Kind Contributions \$                                                                             | <u> </u>                              |                 |
|            | Schedule D - Other Income \$                                                                                      | 0                                     |                 |
|            | Total of all receipts \$                                                                                          | 420100                                | , se            |
| 3.         | Total Monetary Receipts (A+B+D)                                                                                   |                                       | \$420600        |
| 4.         | Candidate's Personal Contribution to                                                                              | Own Campaign                          | \$              |
| 5.         | Monetary Loans to Candidate or Commit<br>Reporting Period                                                         | tee During                            | \$O             |
| 6.         | Monetary Loans Repaid During Reportin                                                                             | g Period                              | \$ <u> </u>     |
| 7.         | Expenditures - Schedule E                                                                                         |                                       | \$ 4200.90      |
| 8.         | Unpaid Obligations - Schedule F \$                                                                                | 0                                     | ·               |

Amount on hand at the close of this reporting period. This should equal lines (1+3+4+5)-(6+7)

and the second of the second

0,10

| Name of Candidate or Committee  | trank Caurenz |
|---------------------------------|---------------|
|                                 |               |
| For the reporting period ending | Dec 31, 2002  |
|                                 |               |

#### Schedule F - Debts and Obligations

This schedule is to report all of the candidate's campaign obligations which are unpaid at the end of the reporting period. If a service has been contracted but not billed, estimate the amount of the obligation.

Owed To

Purpose

Amount

Total Obligations: \$ Na

| Name of Candidate or Committee  | Frank Laurenz |
|---------------------------------|---------------|
| For the reporting period ending | _             |

#### Schedule A - Direct Contributions

This schedule is used for reporting all direct contributions. You must keep a record of all contributors, but for this report you may combine all contributions of \$100 or less from individuals and the same from political parties and enter these sums as unitemized contributions on their respective lines below and on the next page. Any contribution of more than \$100 or aggregate during a calendar year from an individual or political party and all contributions from PAC's must be entered as a separate item (itemized) giving the amount, name, address and place of employment (if applicable) of the contributor. Each type of contributor has their own section for itemization. This schedule may be duplicated if you need more space, or you may attach additional sheets of paper.

| S                                                                                      |          |
|----------------------------------------------------------------------------------------|----------|
| Boque Backers Dupree, SD Se 14 \$ 5 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ | 10100    |
| \$                                                                                     | 101-     |
| \$                                                                                     | <u> </u> |
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| 1 1 4                                                                                  |          |
| \$\$                                                                                   |          |

| Name of | Candidate | or Committee | Frank Laurenz |
|---------|-----------|--------------|---------------|
|         |           |              | Dec 31, 2002  |

### Schedule E - Expenditures

This schedule is to report all expenditures relating to a candidate's campaign. Line items have been provided for reporting common expenses. All other expenses should be listed. All contributions to candidates and committees must be listed individually.

|                 |          |               |      |    | m          |     | a          |
|-----------------|----------|---------------|------|----|------------|-----|------------|
| Item            | Amount   | Contributions | Made | to | Candidates | and | COMMITTEES |
| Advertising     | 3429.89  |               |      |    |            |     |            |
| Consulting      | <u> </u> |               |      |    |            |     |            |
| Postage         |          |               |      |    |            |     |            |
| Printing        | 35200    |               |      |    |            |     |            |
| Rent            |          |               |      |    |            |     |            |
| Salaries        |          |               |      |    |            |     |            |
| Telephone       |          |               |      |    |            |     |            |
| Travel          | 419.06   |               |      |    |            |     |            |
| Utilities       |          |               |      |    |            |     |            |
| Other Expenses: |          |               |      |    |            |     |            |

Total Expenditures: \$4200.90

| Name of Candidate or Committee                                             | Frank Laurenz                     |                          |
|----------------------------------------------------------------------------|-----------------------------------|--------------------------|
| For the reporting period ending_                                           | Dec 31, 2002                      |                          |
| Schedule A - Dire                                                          | ect Contributions (continued)     |                          |
| Jnitemized Contributions from Po                                           | litical Parties:                  | *\$ n/a                  |
| Itemized Contributions from Poli                                           | tical Parties                     | •                        |
| Party Name                                                                 | Address                           |                          |
| Republican State Committee                                                 | Po Box 1099 Piècre, SD 57501      | \$ 1500 <u>00</u>        |
|                                                                            |                                   | \$                       |
| Total of Itemized Contributions                                            | from Political Parties:           | *\$ 1500°                |
| Itemized Contributions from Poli<br>(All contributions from P.<br>PAC Name |                                   |                          |
| SD Trial Lawyers                                                           | POBOX 1154 Perre,SD               | \$ 10000                 |
| Acre                                                                       | ROBIX 1138 Perre, SD 57501        | \$ <u>100</u>            |
| SDRPAC                                                                     | 120 N Endid Previe, SD            | \$ <u>2009</u>           |
| Six-Pac                                                                    | POBOXZIZ Prerre, SD               | \$ <u>100°</u>           |
| RJR-Pac                                                                    | POBOXTI8 Worshofsalen, NC 2710    | 2\$ 1000                 |
| Booked Roberts Bd Pac                                                      | POBOX 190 Prerre, SD 57501        | \$ 150-                  |
| 50 Med Pac                                                                 | 1323 S. Minnesota Sioux Fall      | \$ 200 00                |
| IM PAC.                                                                    | 1917 Sported Sturgis, SD          | \$ 200.00                |
| SD Anesthesiologysts Pac                                                   | 4518 Riverales Dr. Ne STOUX FALLS | \$ 100 00                |
|                                                                            | 8.10                              | \$                       |
|                                                                            |                                   | \$                       |
|                                                                            |                                   | \$                       |
|                                                                            |                                   | \$                       |
|                                                                            |                                   | \$                       |
|                                                                            |                                   | \$                       |
|                                                                            |                                   | \$                       |
| Total Itemized Contributions from                                          | om Political Action Committees:   | *\$ 1250°                |
| Total of All Direct Contribution                                           | ns (Sum of all lines with an *)   | *\$ 1250°0<br>\$ 4201.00 |

| •                                                                                                                                                                                                                | ·                                                                                                                                                            |  |  |  |  |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|--|--|
| Name of Candidate or Committee                                                                                                                                                                                   | rank Laurenz                                                                                                                                                 |  |  |  |  |  |
| For the reporting period ending te                                                                                                                                                                               | <u>c312002</u>                                                                                                                                               |  |  |  |  |  |
| Schedule B - Fund-F                                                                                                                                                                                              | Raising Events Proceeds                                                                                                                                      |  |  |  |  |  |
| List on this schedule fund-raising events held to raise derived from each event. If a contributor gives more aggregate being more than \$100 in the calendar year.                                               | e money for the candidate and the net proceeds<br>e than \$100 or their contribution results in their<br>those contributions must be itemized on Schedule A. |  |  |  |  |  |
| Type of Event                                                                                                                                                                                                    | Net Proceeds                                                                                                                                                 |  |  |  |  |  |
|                                                                                                                                                                                                                  |                                                                                                                                                              |  |  |  |  |  |
|                                                                                                                                                                                                                  |                                                                                                                                                              |  |  |  |  |  |
|                                                                                                                                                                                                                  |                                                                                                                                                              |  |  |  |  |  |
|                                                                                                                                                                                                                  | en e                                                                                                                     |  |  |  |  |  |
|                                                                                                                                                                                                                  |                                                                                                                                                              |  |  |  |  |  |
|                                                                                                                                                                                                                  | Total: \$ na                                                                                                                                                 |  |  |  |  |  |
| ***************************                                                                                                                                                                                      |                                                                                                                                                              |  |  |  |  |  |
| Schedule C - In Kind Contributions                                                                                                                                                                               |                                                                                                                                                              |  |  |  |  |  |
| Report all non-cash contributions of goods or services and the estimated fair market value. If the value exceeds \$100, the name of the contributor, residence address and place of employment must be reported. |                                                                                                                                                              |  |  |  |  |  |
| Nature of Non-Cash Contribution                                                                                                                                                                                  | Estimated Value Name of Contributor                                                                                                                          |  |  |  |  |  |
|                                                                                                                                                                                                                  |                                                                                                                                                              |  |  |  |  |  |
|                                                                                                                                                                                                                  |                                                                                                                                                              |  |  |  |  |  |
|                                                                                                                                                                                                                  |                                                                                                                                                              |  |  |  |  |  |
|                                                                                                                                                                                                                  |                                                                                                                                                              |  |  |  |  |  |
|                                                                                                                                                                                                                  |                                                                                                                                                              |  |  |  |  |  |
|                                                                                                                                                                                                                  | Total: \$                                                                                                                                                    |  |  |  |  |  |
|                                                                                                                                                                                                                  |                                                                                                                                                              |  |  |  |  |  |
| Schedule D - Other Income                                                                                                                                                                                        |                                                                                                                                                              |  |  |  |  |  |
| Use this schedule to report any refunds, interest earn                                                                                                                                                           | ned or other income which is not a direct contribution.                                                                                                      |  |  |  |  |  |
| Source of Income                                                                                                                                                                                                 | Amount                                                                                                                                                       |  |  |  |  |  |
|                                                                                                                                                                                                                  |                                                                                                                                                              |  |  |  |  |  |

Total: \$ na